# HOUSE BILL REPORT E2SHB 2793

#### As Passed House:

February 16, 2016

**Title**: An act relating to providing for suicide awareness and prevention education for safer homes.

**Brief Description**: Providing for suicide awareness and prevention education for safer homes.

**Sponsors**: House Committee on Finance (originally sponsored by Representatives Orwall, Blake, Kretz, Sullivan, Cody, Jinkins, Kagi, Goodman, Ormsby, Tharinger, Rossetti and Reykdal).

# **Brief History:**

### **Committee Activity:**

Judiciary: 1/26/16, 1/28/16 [DPS];

Finance: 2/5/16, 2/8/16 [DP2S(w/o sub JUDI)].

Floor Activity:

Passed House: 2/16/16, 93-4.

# **Brief Summary of Engrossed Second Substitute Bill**

- Establishes a Safe Homes Task Force to develop suicide awareness and prevention education messages and training and implement advocacy efforts with key stakeholders to pair suicide prevention training with distribution of devices for safe storage of lethal means.
- Creates a Safe Homes Project to certify firearms dealers and firearms ranges that meet specified requirements as Safe Homes Partners.
- Requires licensed pharmacists to complete a one-time training on suicide assessment, treatment, and management.

#### HOUSE COMMITTEE ON JUDICIARY

**Majority Report**: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 13 members: Representatives Jinkins, Chair; Kilduff, Vice Chair; Rodne, Ranking Minority Member; Shea, Assistant Ranking Minority Member; Goodman, Haler, Hansen, Kirby, Klippert, Kuderer, Muri, Orwall and Stokesbary.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

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#### HOUSE COMMITTEE ON FINANCE

**Majority Report**: The second substitute bill be substituted therefor and the second substitute bill do pass and do not pass the substitute bill by Committee on Judiciary. Signed by 9 members: Representatives Lytton, Chair; Robinson, Vice Chair; Nealey, Ranking Minority Member; Frame, Pollet, Reykdal, Ryu, Springer and Wylie.

**Minority Report**: Do not pass. Signed by 3 members: Representatives Orcutt, Assistant Ranking Minority Member; Stokesbary and Vick.

**Minority Report**: Without recommendation. Signed by 3 members: Representatives Condotta, Manweller and Wilcox.

Staff: Dominique Meyers (786-7150).

#### Background:

The Department of Health (DOH) has developed a statewide suicide prevention plan (Plan) containing goals and recommendations for policy, system change, and community action to reduce suicides. The Plan includes among its core principles that suicide is a preventable public health problem and that everyone has a role in suicide prevention. The Plan contains numerous recommendations, including: engaging communities in suicide prevention through awareness programs; improving and expanding suicide assessment, treatment, and management for health professionals; and supporting legislation, technology, and public education to reduce access by people in crisis to lethal means, including firearms and medications.

#### Suicide Assessment, Treatment and Management Training.

Certain licensed health professionals are required to complete training in suicide assessment, treatment, and management. Some of these professionals, like licensed social workers and psychologists, must complete the training every six years. Other professionals, like physicians, nurses, and physician assistants, only need to complete the training once. The training must be at least six hours in length, unless only screening and referral elements are appropriate for the professional's scope of practice, in which case the training only needs to be at least three hours in length.

Beginning January 1, 2017, the training must meet minimum standards adopted by the DOH in rule. The standards for six-hour trainings must require content specific to veterans and the assessment of issues related to imminent harm via lethal means or self-injurious behaviors.

### Firearms Safety and Hunter Education.

The Washington Department of Fish and Wildlife (WDFW) is responsible for producing a firearms pamphlet that covers issues of firearms safety, the legal limits of firearms use, and information on firearms laws and regulations. This pamphlet is provided to the Department of Licensing for distribution to firearms dealers and persons authorized to issue concealed

pistol licenses. Firearms dealers are required to give a copy of the pamphlet to firearms purchasers.

The WDFW is responsible for the operation of a statewide hunter education program that must be completed by applicants for a state hunting license that are age 41 or younger. Hunter education courses are taught by volunteers that are trained and certified by the WDFW. The hunter education program consists of at least 10 hours of instruction in safety, conservation, sportsmanship, and firearm handling. The firearms pamphlet may be used in the hunter education program.

## **Summary of Engrossed Second Substitute Bill:**

#### Safe Homes Task Force.

A Safe Homes Task Force (Task Force) is created to raise public awareness and increase suicide prevention education among partners in key positions to prevent suicides. The Task Force consists of a variety of stakeholders, including the DOH, representatives of suicide prevention organizations, the firearms industry and firearms rights organizations, individuals who have experienced suicide loss or survived suicide attempts, pharmacists and pharmacy organizations, the Department of Veterans Affairs, law enforcement, and others. Task Force membership is divided into a Suicide Prevention and Firearms Subcommittee and a Suicide Prevention and Pharmacy Subcommittee.

The Task Force is administered and staffed by the University of Washington (UW) School of Social Work, and its tasks include:

- developing suicide awareness and prevention messages for posters and brochures to be used by firearms dealers, firearms ranges, and pharmacies, and in hunter safety classes;
- developing online trainings on suicide awareness and prevention for firearms dealers, firearms ranges, and their employees;
- reviewing and recommending changes to incorporate suicide awareness and prevention into the firearms safety pamphlet developed by the WDFW;
- developing strategies for disseminating suicide awareness and prevention information for hunting safety classes, including messages to parents of children in the courses;
- developing suicide awareness and prevention messages for training for the schools of pharmacy and providing input on training being developed for community pharmacists;
- creating a website that will be a clearinghouse for the newly created suicide awareness and prevention materials;
- surveying firearms dealers and firearms ranges to determine the types and amounts of incentives that would be effective in encouraging those entities to participate in the Safe Homes Project (Project); and
- creating, implementing, and evaluating a pilot in two counties that have high suicide
  rates to provide advocacy efforts and training to firearms dealers, pharmacies, health
  care providers, and law enforcement on pairing suicide awareness and prevention
  education with the provision of devices for safe storage of firearms and prescription
  medications.

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The Task Force must annually report on its progress to the Legislature beginning December 1, 2016. The final report of the Task Force must include the findings of the suicide awareness and prevention pilot program and recommendations on possible continuation of the program.

By July 1, 2017, the WDFW must update the firearms pamphlet with suicide prevention messages developed by the Task Force.

#### Safe Homes Project.

The DOH is required to develop and administer a Project for firearms dealers and firearms ranges to encourage voluntary participation in a program to implement suicide prevention strategies. The DOH must consult with the Task Force in developing Project requirements. The Project will provide a Safe Homes Partner certification to firearms dealers and firearms ranges that meet the following requirements:

- provide online trainings on suicide awareness and prevention to employees;
- display suicide awareness and prevention posters and hand out suicide awareness and prevention brochures to firearms purchasers and customers; and
- offer safe storage devices, in the form of a lock box or life jacket, for sale at cost to firearms purchasers and customers.

The DOH must provide technical assistance to firearms dealers and firearms ranges that want to participate in the program, and conduct or contract for random audits of businesses who participate in order to ensure compliance with Project requirements. The DOH must implement the Project beginning January 1, 2018. The Project terminates January 1, 2024.

#### Suicide Assessment, Treatment, and Management Training for Pharmacists.

A licensed pharmacist must complete a one-time training on suicide assessment, treatment, and management. The training must be completed by the end of the pharmacist's first full continuing education reporting period after January 1, 2017, or during his or her first full continuing education reporting period after initial licensure, whichever is later. Three-hour trainings for pharmacists must include content related to the assessment of issues related to imminent harm via lethal means.

The Schools of Pharmacy at the UW and Washington State University must convene a work group to develop curriculum for pharmacy students on suicide assessment, treatment, and management that includes identifying at-risk patients and limiting access to lethal means. The Schools of Pharmacy must consult with the Task Force on appropriate messages for the curriculum and submit a progress report to the Governor and Legislature by December 1, 2016. By January 1, 2017, the DOH and the Pharmacy Quality Assurance Commission, in consultation with the Task Force and experts on suicide assessment, treatment and management, must develop written materials on suicide awareness and prevention for pharmacies to post or distribute to customers.

**Appropriation**: None.

Fiscal Note: Available.

**Effective Date**: This bill takes effect 90 days after adjournment of the session in which the bill is passed, except for section 5, relating to training in suicide assessment, which takes effect on January 1, 2017.

# **Staff Summary of Public Testimony** (Judiciary):

(In support) Washington has a suicide rate that is 14 percent higher than the national average. Forty-nine percent of suicide deaths are by firearms and 19 percent are by prescription medications. We have done a lot in this area, but more action is needed. This bill is the result of a broad group of stakeholders. It focuses on suicide prevention efforts involving education, training, and incentive programs to reduce access to lethal means.

Suicide has a huge impact on families and friends, but also an impact on the community as whole. For too long our society has perpetuated a myth that we cannot do anything if someone has decided to take his or her own life. This is a public health issue that can be solved. Every person has a role to play in preventing suicide, but prevention requires awareness, knowledge, and a concerted effort.

People need to understand the warning signs and the importance of safe storage of lethal means. Firearms and poisonings represent almost 70 percent of suicide deaths, and the evidence shows that these items are not being stored safely. There are people who would not be here today if they had had access to lethal means, because they were acting on an impulse in a time of crisis. Ten percent of firearm suicides occur within one week of the firearm's purchase. Having dealers and pharmacists who are trained on suicide prevention creates an opportunity for intervention. The issue of suicide has been in the dark for a long time in this country. We need to bring it into light in order to save lives.

This is a common sense measure relating to firearms. The bill does not place burdens on firearms owners or restrict firearm rights. It is not a gun control bill, but rather is about awareness, education, and prevention. In the stories you hear about suicide, there is the common thread that family or friends did not know or understand the warning signs. Intervention and prevention are not possible unless there is recognition of the problem. Dealers and ranges are in the best position to communicate with firearm owners, and the bill could incentivize these folks to educate themselves and their employees. It would be helpful to extend the incentive program to ranges and businesses that produce safe storage devices.

Pharmacists are in a unique position to help because they are one of most frequently contacted health care providers. The pharmacist's role is less about dispensing and more about safe use of prescription medications. They see and know the patient's demeanor and mannerisms, so if they are equipped with suicide assessment training, they can make a big difference.

The issue of suicide prevention is critically important for the veteran community. The veteran's administration system is a broken system. Two of 10 suicide victims are veterans and 80 percent of veteran suicides are through firearms. It is important to address the root causes and target prevention. There should be a veteran's voice on the Task Force.

(Opposed) None.

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(Other) The WDFW supports these suicide prevention efforts. The hunter education curriculum teaches safe storage and handling of firearms, and in the past we have passed out free safety devices. We reach between 13,000 and 15,000 students every year.

#### **Staff Summary of Public Testimony** (Finance):

(In support) Washington has a higher rate of suicide than the national average. More action is needed to prevent suicides in this state. Twenty-three percent of suicides are from men and women who have served our country. Firearms and overdoses are the two most lethal means of suicide. The right people reaching out is really how we can make a difference, but we need the incentive for voluntary participation in the program designed in this legislation. The bill is a result of a broad group of stakeholders, including groups that would participate in these programs, firearms dealers, and pharmacists. We lose more people by suicide in this state than to car accidents and homicides combined. If lethal means are restricted, there is a reduction in suicide deaths. It is exciting that firearms and pharmaceutical companies are in support of this bill. The modest tax incentives are vital to help reduce suicides in this state. The cost of suicides to this state are far less than the costs in the fiscal note. The bill is about awareness, education, and prevention, it is not a gun control bill. The financial incentives are extremely important to make this bill work. The tax credit will increase participation dramatically. It is important that the firearms dealers participate because they will be handing out important information to the people that can directly influence the intended outcome of this legislation. The bill is a common sense way to approach suicide prevention. Based on a Centers of Disease Control and Prevention report, it can be estimated that suicide deaths in 2014 cost the state \$1.3 billion, this is much more than the cost of the fiscal note.

# (Opposed) None.

**Persons Testifying** (Judiciary): (In support) Representative Orwall, prime sponsor; Jennifer Stuber, Forefront; Kathleen Gilligan; Brian Judy, National Rifle Association; Jeff Rochon, Washington State Pharmacy Association; Alfie Alvarado, Washington State Department of Veterans Affairs; Cassandra Ando, National Association on Mental Illness Washington; Rebecca Johnson, Alliance for Gun Responsibility; Melissa Fisher; Jo Arlow; Kathy Young, Grandmothers Against Gun Violence; Raymond Carter, Citizens Committee for the Right to Keep and Bear Arms; Margaret Heldring, Alliance for Gun Responsibility and Grandmothers Against Gun Violence; Philip Shave, Washington Arms Collectors; Caitlin Lavine; and Patrick Seifert, Twenty22Many.

(Other) David Whipple, Washington Department of Fish and Wildlife.

**Persons Testifying** (Finance): Tom Kwieciak, National Rifle Association; Alan Gottlieb, Second Amendment Foundation; Seth Dawson, Washington State Psychiatric Association and National Alliance on Mental Illness; Lori Pender, Statewide Suicide Prevention Plan Steering Committee; Mark Torrance, Mark Torrance Foundation; and Jennifer Stuber, Forefront at the University of Washington.

Persons Signed In To Testify But Not Testifying (Judiciary): None.

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Persons Signed In To Testify But Not Testifying (Finance): None.